

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Liberty Action PAC

ADDRESS (number and street) ▼

P.O. Box 540629

☐ Check if different than previously reported. (ACC)

Orlando

FL

32854

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00508598

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☒ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
07 01 2013

through

M M M / D D D / Y Y Y Y Y Y
12 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Deryl Madison Edwards

Signature of Treasurer

Mr. Deryl Madison Edwards

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
01 31 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Liberty Action PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
07		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
12		31		2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date															
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2013</td></tr></table>	Y	Y	Y	Y	Y	2013						<table><tr><td colspan="5">78094.92</td></tr></table>	78094.92				
Y	Y	Y	Y	Y													
2013																	
78094.92																	
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="5">23645.41</td></tr></table>	23645.41															
23645.41																	
(c) Total Receipts (from Line 19)	<table><tr><td colspan="5">72957.41</td></tr></table>	72957.41					<table><tr><td colspan="5">72957.41</td></tr></table>	72957.41									
72957.41																	
72957.41																	
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="5">96602.82</td></tr></table>	96602.82					<table><tr><td colspan="5">151052.33</td></tr></table>	151052.33									
96602.82																	
151052.33																	
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="5">81041.84</td></tr></table>	81041.84					<table><tr><td colspan="5">135491.35</td></tr></table>	135491.35									
81041.84																	
135491.35																	
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="5">15560.98</td></tr></table>	15560.98					<table><tr><td colspan="5">15560.98</td></tr></table>	15560.98									
15560.98																	
15560.98																	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="5">0.00</td></tr></table>	0.00															
0.00																	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Liberty Action PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
07 01 2013

To:

M M / D D / Y Y Y Y Y
12 31 2013
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

12718.92

12718.92

(ii) Unitemized

60238.49

60238.49

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

72957.41

72957.41

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

72957.41

72957.41

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

72957.41

72957.41

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

72957.41

72957.41

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	81041.84	135491.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	81041.84	135491.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	81041.84	135491.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	81041.84	135491.35

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	72957.41	72957.41
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	72957.41	72957.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	81041.84	135491.35
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	81041.84	135491.35

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. DENNIS ANSTEY

Mailing Address 19684 WHISKEY RIDGE

City State Zip Code
 OTTUMWA IA 52501

FEC ID number of contributing federal political committee.

C

Name of Employer

DEERE & CO.

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2013

Transaction ID : SA11AI.7076

Amount of Each Receipt this Period

20.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. DENNIS ANSTEY

Mailing Address 19684 WHISKEY RIDGE

City State Zip Code
 OTTUMWA IA 52501

FEC ID number of contributing federal political committee.

C

Name of Employer

DEERE & CO.

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2013

Transaction ID : SA11AI.7077

Amount of Each Receipt this Period

30.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. ARMAND AVANT

Mailing Address 5423 QUAIN DR.

City State Zip Code
 WOODBRIDGE VA 22193

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 10 / 22 / 2013

Transaction ID : SA11AI.4479

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 7 OF 21

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. CAROL BOGOSIAN

Mailing Address 105 MARLAND RD. S.

City	State	Zip Code
COLORADO SPRINGS	CO	80906

FEC ID number of contributing
federal political committee.

C

Name of Employer

MJ BOGOSIAN & COMPANY

Occupation

VICE PRES./CHIEF OPERATING OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		19		2013

Transaction ID : SA11AI.4576

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. GUY M. BOWERS

Mailing Address PO BOX 8090

City	State	Zip Code
RUIDOSO	NM	88355

FEC ID number of contributing
federal political committee.

C

Name of Employer

N/A

Occupation

INVESTOR/MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2013

Transaction ID : SA11AI.4597

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. JIM BROWN

Mailing Address 1976 MEDINA RD

City	State	Zip Code
MEDINA	OH	44256

FEC ID number of contributing
federal political committee.

C

Name of Employer

SRM, INC.

Occupation

TRUCKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2013

Transaction ID : SA11AI.4641

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. JOHN COOPER

Mailing Address 1850 CRAFTS CHURCH ROAD

City State Zip Code
 GLADE HILL VA 24092

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 26 2013

Transaction ID : SA11AI.4777

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. DAN DUCKWORTH

Mailing Address 3304 N MIDKIFF RD

City State Zip Code
 MIDLAND TX 79705

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 25 2013

Transaction ID : SA11AI.4915

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. DAVID HULTGREN

Mailing Address 2170 ELDRIDGE AVE E

City State Zip Code
 NORTH ST PAUL MN 55109

FEC ID number of contributing
federal political committee.

C

Name of Employer

CTS

Occupation

PROGRAMMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 22 2013

Transaction ID : SA11AI.5321

Amount of Each Receipt this Period

800.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. DEAN JOHNSON

Mailing Address 1503 SPEEGLE DRIVE

City
HUNTSVILLE

State Zip Code
AL 35801

FEC ID number of contributing
federal political committee.

C

Name of Employer
L. DEAN JOHNSON, PC

Occupation
ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2013

Transaction ID : SA11AI.5350

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. MARA KAMEROW

Mailing Address 3509 CONNECTICUT AVE, NW #460

City
WASHINGTON

State Zip Code
DC 20008

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
REAL ESTATE INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 26 / 2013

Transaction ID : SA11AI.5379

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. KERMIT KLEFSAAS

Mailing Address 35585 AZTEC ROAD

City
MOTLEY

State Zip Code
MN 56466

FEC ID number of contributing
federal political committee.

C

Name of Employer
ISD #2170

Occupation
TEACHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 22 / 2013

Transaction ID : SA11AI.5427

Amount of Each Receipt this Period

315.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1815.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 OF 21

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. ARLYN LANTING

Mailing Address 26407 BRICK LANE

City

BONITA SPRINGS

State

FL

Zip Code

34134

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2013

Transaction ID : SA11AI.5481

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. ARLYN LANTING

Mailing Address 26407 BRICK LANE

City

BONITA SPRINGS

State

FL

Zip Code

34134

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2013

Transaction ID : SA11AI.5482

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. BONNIE LATSHAW

Mailing Address P O BOX 691017

City

TULSA

State

OK

Zip Code

74169

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 10 / 2013

Transaction ID : SA11AI.5488

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. Liberty Counsel Action

Mailing Address P.O. Box 540629

City State Zip Code
 Orlando FL 32854

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.92

Date of Receipt

M M / D D / Y Y Y Y Y
 12 31 2013

Transaction ID : SA11AI.7788

Amount of Each Receipt this Period

303.92

In-kind - DOMAIN NAME REIMBURSEMENT

Full Name (Last, First, Middle Initial)

B. JACK NICHOLS

Mailing Address 5948 RIVERSIDE DR

City State Zip Code
 REDDING CA 96001

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

NORTH VALLEY ORTHOPEDICS

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 03 2013

Transaction ID : SA11AI.7641

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. K. W. PRINCE

Mailing Address 4912 HOLLY HILL ROAD

City State Zip Code
 ALBANY GA 31721

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 15 2013

Transaction ID : SA11AI.5901

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1053.92

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. K. W. PRINCE

Mailing Address 4912 HOLLY HILL ROAD

City State Zip Code
 ALBANY GA 31721

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 31 2013

Transaction ID : SA11AI.6760

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. KENNETH RESZTAK

Mailing Address 3604 SUMTER GLADE

City State Zip Code
 SCHERTZ TX 78154

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 28 2013

Transaction ID : SA11AI.5942

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. KENNETH RESZTAK

Mailing Address 3604 SUMTER GLADE

City State Zip Code
 SCHERTZ TX 78154

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 02 2013

Transaction ID : SA11AI.7363

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

700.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. BRIAN RICHARDSON

Mailing Address 1718 PORT BARMOUTH PL

City State Zip Code
 NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer

FSWW, INC.

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 21 / 2013

Transaction ID : SA11AI.5960

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. BRIAN RICHARDSON

Mailing Address 1718 PORT BARMOUTH PL

City State Zip Code
 NEWPORT BEACH CA 92660

FEC ID number of contributing
federal political committee.

C

Name of Employer

FSWW, INC.

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 10 / 30 / 2013

Transaction ID : SA11AI.7560

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. BEA RILEY

Mailing Address PO BOX 238

City State Zip Code
 YUCAIPA CA 92399

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
 11 / 03 / 2013

Transaction ID : SA11AI.7549

Amount of Each Receipt this Period

400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. EARL SCHARNICK

Mailing Address 5892 BILEK DR

City
PENSACOLA

State Zip Code
FL 32526

FEC ID number of contributing
federal political committee.

C

Name of Employer

STARBUCKS

Occupation

BARISTA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2013

Transaction ID : SA11AI.6065

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. ARTHUR SCHULTZ

Mailing Address 3119 WATERSIDE LANE

City
ALEXANDRIA

State Zip Code
VA 22309

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2013

Transaction ID : SA11AI.6082

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. C. B. SKINNER

Mailing Address 6210 SAN JOSE BLVD W

City
JACKSONVILLE

State Zip Code
FL 32217

FEC ID number of contributing
federal political committee.

C

Name of Employer

BRIGHTMAN SKINNER

Occupation

FORESTRY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 19 / 2013

Transaction ID : SA11AI.6142

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. ELIZABETH VAN VALIN

Mailing Address PO BOX 7649

City

CAVE CREEK

State

AZ

Zip Code

85327

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 12 / 2013

Transaction ID : SA11AI.6339

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. JOELLE VOLPE

Mailing Address 791 CABIN RD

City

HARRAH

State

OK

Zip Code

73045

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 03 / 2013

Transaction ID : SA11AI.7244

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. JOELLE VOLPE

Mailing Address 791 CABIN RD

City

HARRAH

State

OK

Zip Code

73045

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 05 / 2013

Transaction ID : SA11AI.7245

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 21
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. CYNTHIA WEBSTER

Mailing Address 2603 CORTEZ BLVD.

City

FORT PIERCE

State

FL

Zip Code

34981

FEC ID number of contributing
federal political committee.

C

Name of Employer

DALES BBQ

Occupation

MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 16 / 2013

Transaction ID : SA11AI.6389

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. JACK WEYLER

Mailing Address 1012 NE OAKRIDGE CIR

City

CLAREMORE

State

OK

Zip Code

74017

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 28 / 2013

Transaction ID : SA11AI.6413

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. JACK WEYLER

Mailing Address 1012 NE OAKRIDGE CIR

City

CLAREMORE

State

OK

Zip Code

74017

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2013

Transaction ID : SA11AI.7256

Amount of Each Receipt this Period

50.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

650.00

TOTAL This Period (last page this line number only)..... ►

12718.92

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Liberty Action PAC

A. COMPLIANCE CONSULTING LLC

Date of Disbursement



Transaction ID : SB21B.4412

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

2000.00

B. Cornerstone Payment Systems

Mailing Address 1315 Euclid Avenue

Date of Disbursement

City	State	Zip Code
Boston	VA	24201

Transaction ID : SB21B.4417

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
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93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

2479.65

Full Name (Last, First, Middle Initial)

C. Grassroots Action, Inc

Date of Disbursement

Mailing Address 90 Main Street

City	State	Zip Code
Maxwell	IA	50161

Transaction ID : SB21B.4414

Purpose of Disbursement
EMAIL/WEB SERVICES

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

20962.07

SUBTOTAL of Disbursements This Page (optional).....

25441.72

TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. Liberty Counsel

Mailing Address P.O. Box 540774

City Orlando State FL Zip Code 32854

Purpose of Disbursement
LIST RENTAL EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2013

Transaction ID : SB21B.4416

Amount of Each Disbursement this Period

558.68

Full Name (Last, First, Middle Initial)

B. Liberty Counsel Action

Mailing Address P.O. Box 540629

City Orlando State FL Zip Code 32854

Purpose of Disbursement
LIST RENTAL EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2013

Transaction ID : SB21B.4415

Amount of Each Disbursement this Period

54467.52

Full Name (Last, First, Middle Initial)

C. Liberty Counsel Action

Mailing Address P.O. Box 540629

City Orlando State FL Zip Code 32854

Purpose of Disbursement
In-kind - DOMAIN NAME REIMBURSEMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2013

Transaction ID : SB21B.7789

Amount of Each Disbursement this Period

303.92

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55330.12

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Liberty Action PAC

Full Name (Last, First, Middle Initial)

A. Sullivan & AssociatesMailing Address 601 Pennsylvania Avenue NW
Ste. 900

City Washington State DC Zip Code 20004

Purpose of Disbursement
LEGAL CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 18 2013

Transaction ID : SB21B.4411

Amount of Each Disbursement this Period

270.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

270.00

81041.84

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 20 OF 21

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Liberty Action PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Liberty Counsel Action

Nature of Debt (Purpose):

reimbursement for purchase of domain names
at Network Solutions

Mailing Address P.O. Box 540629

City State

Zip Code

Orlando

FL

32854

Outstanding Balance Beginning This Period

303.92

Transaction ID : SD10.4277

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

0.00

2) **TOTALS** This Period (last page this line number only)..... ►

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SD10
Transaction ID : SD10.4277

Current loan amount of 303.92 from a balance of 303.92 has been converted into an in-kind contribution. See
Schedule A and B.

Form/Schedule:
Transaction ID: